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Department of the

Treasury

DLN: 93493320036426

OMB No 1545-0047

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u>

nterna	l Reven	uue Service				Inspection
\ F	or the 2	2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-201	5			
Che	ck if ap	plicable C Name of organization		D Emplo	oyer i	dentification number
T Ac	dress ch			26-0	6205	554
∏ N∂	me cha	nge Doing business as				
		rn				
			te	E Teleph	none n	umber
_ `		■ 6750 WESTOWN PKWY 200-156		(515	720 (-5250
Ар	olication	pending City or town, state or province, country, and ZIP or foreign postal code				
		WEST DES MOINES, IA 50266		G Gross	receip	ts \$ 351,250
		F Name and address of principal officer	H(a) ⊺	s this a groui	n reti.	ırn for
		ALLISON KLEIS				⊤ Yes 🗸
Та	c-exemp				linate	S
					h a lis	st (see instructions)
W	ebsite:	:▶ WWW AMERICANFUTUREFUND COM	H(c) (Group exemp	tion r	number >
C Form	n of orna	anization Comporation Trust Association Other				M State of legal domicile IA
	0. 0.9.					
Check chaptocle Address charge Total natura Number and Street (or P.O. box if mail is not delivered to street address) Noom/ustreet Number and Street (or P.O. box if mail is not delivered to street address) Noom/ustreet Sys West CoW RRW 200-156						
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	<u>PR</u>	OMOTE CONSERVATIVE FREE MARKET PRINCIPLES TO THE CITIZENS O	F A M E R I	I C A		
נ	_					
The country defined by the property dependence of the property dependence o						
Į.	2 C	heck this box ▶ ┌ if the organization discontinued its operations or disposed o	f more th	an 25% of it	s net	assets
5						
	3 N	umber of voting members of the governing body (Part VI, line 1a) $\cdot\cdot\cdot$.			3	2
<u>^</u>	4 N	umber of independent voting members of the governing body (Part VI, line 1b)			4	1
2	5 To	otal number of individuals employed in calendar year 2015 (Part V, line 2a) .			5	0
֝֝֝֝֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֡֓֓֡֓֡֓֡֓֓֓֓֡֓֡֓֡֓֡	6 To	otal number of volunteers (estimate if necessary)			6	50,000
•	7a ⊤o	otal unrelated business revenue from Part VIII, column (C), line 12			7a	0
	ь Ne	t unrelated business taxable income from Form 990-T, line 34			7b	(
				Prior Year		Current Year
	8	Contributions and grants (Part VIII, line 1h)		6,906	,121	327,500
ġ	9	Program service revenue (Part VIII, line 2q)			0	C
Ver	10			1	,523	965
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	22,785
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	:	6.007	611	
		12)		0,907	,644	331,230
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		1,317	,700	40,450
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	С
10	15				0	C
S) S)		•				
9	16a		·	43	,/50	2,500
ă	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,500				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,086	,646	503,295
	18			7,448	,096	546,245
	19	Revenue less expenses Subtract line 18 from line 12		-540	,452	-194,995
5 8			Beginni	ng of Current	Year	End of Year
a a u	20	Total accets (Dart V. June 16.)		1 5 2 7	100	1 222 204
88				1,327		1,552,204
ڪِ ڇَ			•	1 527		1 222 204
				1,32/	,199	1,332,204
Could if approach proposed Control Proposed Pro						
	Cay at both, attitue and control to the companies of the					
Sign		Signature of officer				
		ALLISON KLEIS TREASURER				
Address change Name change Initial return Final eturn/terminated Amended return Application pending Website: WWW A FAL 67 WE Tax-exempt status Website: WWW A Form of organization PROMOTE CO A Number of roc PROMOTE CO Total number Total number Total number Total number Total number Total reve 11 Other reve 12 Total reve 12 Total reve 11 Other reve 12 Total reve 12 Total reve 12 Total reve 13 Grants and 14 Benefits p 15 Salaries, or 5-10) 16a Profession b Total fundral 17 Other exp 18 Total expe 19 Revenue loc Website: WWW A Total number Total number Total reve 12 Total reve 12 Total reve 12 Total reve 13 Grants and 14 Benefits p 15 Salaries, or 5-10) 16a Profession b Total fundral 17 Other exp 18 Total expe 19 Revenue loc Website: WWW A Total reve 12 Total reve 12 Total liabil 22 Net asset Part II Signatur Inder penalties of perguny knowledge and believe preparer has any knowledge Part II Signature ALLISON & Type or p Print/TATHY ALLISON & Type or p Print/TATHY Print/TathY Print/TathY ALLISON & Type or p Print/TATHY Print/TathY Print/TathY ALLISON & Type or p Print/TATHY Print/TathY Print/TathY Print/TathY Print/TathY Print/TathY ALLISON & Type or p						
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Paid	i			self-employed		
Contact posteriors Reference incharge Refer	4325					
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DES MOINES, IA 503092354

Use Only

416,771

Total program service expenses ▶

Par	t IV Checklist of Required Schedules		Voc	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes,"		Yes	No No
	complete Schedule A	1		110
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Yes	N a
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Pait V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11 c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11 d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12 a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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35b

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Yes

Form 990 (2015)

	-					
IV		Checklist of	Required	Schedules	(continued)	

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

26	Checklist of Required Schedules (Continued)			
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	Yes	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part	1		

Did the organization answer "Yes" to Part VII. Section A. line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Pait I .

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Pait I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

V	Checklist of Re	equired Schedules	(continued)

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance					
		Check if Schedule O contains a response or note to any line in this	Part	<u>V</u>		Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	19		1 62	140
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
		ne organization comply with backup withholding rules for reportable payments t		dors and reportable			
·		ng (gambling) winnings to prize winners?		· · · · · ·	1c	Yes	
2a		the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered s return	2a	0			
b		east one is reported on line 2a, did the organization file all required federal em			2b		
_		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file					
3a	Did th	ne organization have unrelated business gross income of \$1,000 or more durin	g the	year [?]	3a		No
b	If "Ye	s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanati	on in S	Schedule O	3b		
4a		y time during the calendar year, did the organization have an interest in, or a s					
		a financial account in a foreign country (such as a bank account, securities ac int)?	count	, or other imancial	4a		No
b	If"Ye	es," enter the name of the foreign country					
		nstructions for filing requirements for FinCEN Form 114, Report of Foreign Ban	k and	Financial Accounts			
	(FBAF						
		he organization a party to a prohibited tax shelter transaction at any time duri			5a		No
Ь	Did ar	ny taxable party notify the organization that it was or is a party to a prohibited	tax sh	ielter transaction?	5b		No
С	If"Ye	es," to line 5a or 5b, did the organization file Form 8886-T?			Fa		
62	Door	the organization have annual gross receipts that are normally greater than \$1	00 00	0 and did the	5c 6a	Yes	
Va		ization solicit any contributions that were not tax deductible as charitable con			Va	165	
b		s," did the organization include with every solicitation an express statement t	hat su	ch contributions or gifts			
_		not tax deductible?			6b	Yes	
	_	nizations that may receive deductible contributions under section 170(c).		dd.	- -		
а		ne organization receive a payment in excess of \$75 made partly as a contribut ses provided to the payor?		a partly for goods and	7a		
b	If"Ye	es," did the organization notify the donor of the value of the goods or services p	rovide	ed?	7b		
С		ne organization sell, exchange, or otherwise dispose of tangible personal prope	rty for	which it was required to			
		orm 8282?			7 c		
a	It "Ye	es," indicate the number of Forms 8282 filed during the year	7d				
е	Did th	ne organization receive any funds, directly or indirectly, to pay premiums on a	persor	al benefit contract?			
_				6	7e		
		ne organization, during the year, pay premiums, directly or indirectly, on a pers			7f		
g	requir	organization received a contribution of qualified intellectual property, did the ored?	organız	zation file Form 8899 as	7g		
h	Ifthe	organization received a contribution of cars, boats, airplanes, or other vehicle	s, dıd	the organization file a			
		1098-C?	•		7h		
8	•	soring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bu	isines	s holdings at any time			
		the year?			8		
9a	Did th	ne sponsoring organization make any taxable distributions under section 4966	? .		9a		
b	Did th	ne sponsoring organization make a distribution to a donor, donor advisor, or rel	ated p	erson?	9b		
10	Section	on 501(c)(7) organizations. Enter					
а	Initiat	tion fees and capital contributions included on Part VIII, line 12	10a				
b		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
11	faciliti Sectio	nes on 501(c)(12) organizations. Enter		1			
		sincome from members or shareholders	11a				
		s income from other sources (Do not net amounts due or paid to other sources	_ 				
		st amounts due or received from them)	11b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	0 ın lıe	eu of Form 1041?	12a		
		s," enter the amount of tax-exempt interest received or accrued during the					
	year		12b				
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the	e organization licensed to issue qualified health plans in more than one state?	Note 9	See the instructions for			
-		onal information the organization must report on Schedule O		, se the methods fol	13a		
b		the amount of reserves the organization is required to maintain by the states	134				
_		ch the organization is licensed to issue qualified health plans	13b				
		the amount of reserves on hand	13c]			
		ne organization receive any payments for indoor tanning services during the ta	•		14a		No
U	ті ке	es," has it filed a Form 720 to report these payments? <i>If "No," provide an explan</i>	aciOil II	i Scriedule U	14b		

Form 990	(2015)								Pad
Part VI	,	,			8a,	8b, d	 or 10	b belo	
	Check if Schedule O contains a response or note to any line in this Part VI								
Sectio	n A. Governing Body and Management								
								Yes	N
1a Ente	er the number of voting members of the governing body at the end of the tax	1a				2			
body	ere are material differences in voting rights among members of the governing y, or if the governing body delegated broad authority to an executive committee imilar committee, explain in Schedule O								
b Ente	er the number of voting members included in line 1a, above, who are		ĺ						

	or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b		1		
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?				2	No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co	,			3	No
1	Did the organization make any significant changes to its governing documents since filed?	•			4	No
5	$\label{eq:definition} Did the organization become aware during the year of a significant diversion of the organization and the organization of the organizatio$	rganız	ation's assets? .		5	No
5	Did the organization have members or stockholders?				6	No
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?				7a	No
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?		•		7b	No
3	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the			

4	filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	even	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters.			

3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	<u>.</u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10 a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12 a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► FL			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			

b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12 a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12 c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► FL			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of			

interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records ►ALLISON KLEIS 6750 WESTOWN PKWY 200-156 WEST DES MOINES, IA 50266 (515) 720-5250

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

▼ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)	<u></u>		(C)		1.	(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related	urs per more than one box, unless compensations from the person is both an officer and a director/trustee) organization of the person is both an officer and a director/trustee)							Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	` MİSC)	organization and related organizations
(1) SANDY GREINER	3 00							_		
PRESIDENT/DIRECTOR	0 00	×		×				0	0	0
(2) ALLISON KLEIS	3 00	.,		,,				-		
TREASURER/SECRETARY	0 00	×		Х				0	0	0

art VII	Section A. Officers, Director	s, Trustees, Key Employees, and Highes	t Compensated Employees (continued)
		·, ····, ··· · · · · · · · · · · · · ·	

(A) Name and Title	(B) A verage hours per week (list any hours	more t	than o	one l both	oox, an d	heck unless officer stee)	;	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			organization and related organizations
1b Sub-Total		٠				. •				
c Total from continuation shed Total (add lines 1b and 1c)					•	. 🔪		0	0	0

- \$100,000 of reportable compensation from the organization \triangleright 0
- Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . . 3 Νo For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such ındıvıdual . 4 Νo 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person . . . 5 Νo

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

compensation from the organization. Report compensation for the calendar year ending	with or within the organization's	s tax year
(A) Name and business address	(B) Description of services	(C) Compensation
	CONSULTING AND MANAGEMENT SERVICES	210,000
6601 WESTOWN PARKWAY SUITE 240 WEST DES MOINES, IA 50266		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \triangleright 1

Part V	/++1	Statement of	Revenue					
		Check if Schedul	e O contains a respor	nse or note to any li	ne in this Part VIII		<u> </u>	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s &	1a	Federated campa	aigns 1a					
und and	ь	Membership due	s 1b					
Gr.	c	Fundraising ever	nts 1c					
ffs. r A	d	Related organiza						
ij e		Government grants						
ns, Sin	е	_						
utic er	f	All other contribution similar amounts not	ns, gifts, grants, and 1f included above	327,500				
tributions, Gifts, Grants Other Similar Amounts	g	Noncash contributior 1a-1f \$	ns included in lines					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	1a-1f	•	327,500			
₹				Business Code				
٧٠	2a							
å <u>¥</u>	b							
Š	C d	-						
₹	e e							
Program Service Revenue	f	All other program	m service revenue					
fog	'							
<u> </u>	g		2a-2f					
	3		me (including dividen ramounts)		965			965
	4	Income from investr	ment of tax-exempt bond	proceeds >				
	5	Royalties		•				
	6a	Gross rents	(ı) Real	(II) Personal				
	h	Less rental						
	-	expenses Rental income						
	°	or (loss)						
	d	Net rental incom	(ı) Securities	▶ (II) O ther				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
	b c	Less cost or other basis and sales expenses Gain or (loss)						
	d)	· · · · ·				
Other Revenue	8a		uding reported on line 1c)					
e. R		See Part IV, line	a 18					
0		Less direct expe						
	C 02	•	oss) from fundraising o om gaming activities	events >				
	54	See Part IV, line						
	ь	Less direct exp						
	1		oss) from gaming acti	vities				
	102	Gross sales of in	oventory less	<u> </u>				
	100	returns and allow	vances .					
	b b	Less cost of goo	a ods sold b					
	1		oss) from sales of inve	entory >				
		Miscellaneous		Business Code				
	11a	MEDIA REFUND	os	900099	22,785			22,785
	b		-					
	c							
	d	All other revenue	e					
	e	Total. Add lines	11a-11d	🕨	22,785			
	12	Total revenue. S	ee Instructions .	🕨	351,250	0	0	23.750

Part IX Statement of Functional Expenses

Section 501(c)(3) and	501(c)(4)	organizations must com	plete all columns All	other organizations must com	plete column (A	()

,,,	0 = (0)(3	, unu	3 O I (<u> </u>	<u>' / '</u>	rigai	nza	CIOII	, ,,,	u J t	COII	PIC		111 0	orum	13 /	11 0	tile! o	i gai	ILCU	.1011	, ,,,,,,	150	COIII	piece	 Jiun	(/	· /		
	Check	ıfSc	hedu	le O	со	ntai	ns ā	res	por	nse	or n	ote	e to a	any	line i	n this	s P	art IX	·											

	 ✓				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	40,450	40,450		
2	Grants and other assistance to domestic individuals See Part IV, line 22	40,430	40,430		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15				
	and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	21,632	14,983	6,649	
C	Accounting	4,500		4,500	
d	Lobbying	2.500			2.500
e	Professional fundraising services See Part IV, line 17	2,500			2,500
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A)				
g 43	amount, list line 11g expenses on Schedule O)	371,000	349,215	21,785	
12	Advertising and promotion	15 140		15 140	
13 14	Office expenses	15,149	10,030	15,149	
15	Royalties	10,030	10,030		
16	Occupancy	37,500		37,500	
17	Travel	34,915		34,915	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	34,313		34,313	
19	Conferences, conventions, and meetings	3,110		3,110	
20	Interest	3,110		3,110	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	3,366		3,366	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)			·	
а	MAIL PRODUCTION AND POS	1,533	1,533		
b	TAXES	560	560		
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	546,245	416,771	126,974	2,500
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

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1,527,199

1,527,199

0

1,332,204

1,332,204

1,332,204

1,332,204

Form 990 (2015)

1,527,199

Form 9	90 (2	2015)			Page 11
Part	X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part \boldsymbol{X}			
			(A)		(B)
			Beginning of year		End of year
	1	Cash-non-interest-bearing	1,527,199	1	1,332,204

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part $X \ \ . \ \ .$			
		(A) Beginning of year		
1	Cash-non-interest-bearing	1,527,199	1	
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			

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10a

b

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Net Assets or Fund Balances

Part II of Schedule L

Notes and loans receivable, net .

Prepaid expenses and deferred charges

Investments—publicly traded securities

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here >

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

persons Complete Part II of Schedule L

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities.Add lines 17 through 25 .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Inventories for sale or use .

Complete Part VI of Schedule D

Intangible assets .

Grants payable

Deferred revenue

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets .

complete lines 30 through 34.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Less accumulated depreciation .

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete

10a

10b

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3b

DLN: 93493320036426

Employer identification number

26-0620554

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Political expenditures
Volunteer hours

AMERICAN FUTURÉ FUND

2

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2015
Open to Public Inspection

Internal Revenue
Service

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Provide a description of the organization's direct and indirect political campaign activities in Part IV

• Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

Раг	Complete if the or	ganization is exempt under :	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization und	ler section 4955	•	\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4955	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		┌ Yes
4 a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under s	section 501 (c), except section 50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	t function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to oth	ner organizations	for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120)-POL, line 17b ►	\$
4	Did the filing organization file F	orm 1120-POL for this year?			Yes No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid froi rectly delivered t	n the filing organization's fi o a separate political orgai	unds Also enter the nızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					
6					
For F	aperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990	- EZ. C.	at No 50084S Schedule C (F	orm 990 or 990-EZ) 2015

,	,
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).
. Check ▶	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EI expenses, and share of excess lobbying expenditures)

	under section 501(h)).									
4	Check ► ☐ If the filing organization belongs to expenses, and share of excess lob		ffiliated gro	up member's nam	e, address, EIN,					
3	Check ► ☐ If the filing organization checked b	oox A and "limited control" provisions apply								
		ying Expenditures neans amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals					
1a	Total lobbying expenditures to influence public	opinion (grass roots								
b	lobbying) Total lobbying expenditures to influence a legis	lative body (direct lobbying)								
c	Total lobbying expenditures (add lines 1a and 1	b)								
d Other exempt purpose expenditures										
e	Total exempt purpose expenditures (add lines 1	lc and 1d)								
f	Lobbying nontaxable amount Enter the amount	from the following table in both columns								
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	1							
	Not over \$500,000	20% of the amount on line 1e	1							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	1							
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	1							
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	1							
	Over \$17,000,000	\$1,000,000]							
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)								
h	Subtract line 1g from line 1a If zero or less, en	ter - 0 -								
i	Subtract line 1f from line 1c If zero or less, ent	er - 0 -								
j	If there is an amount other than zero on either I reporting section 4911 tax for this year?	·								
		□ Υ e	s No	·						
	(Some organizations that made a	veraging Period Under section 501 section 501(h) election do not hav the separate instructions for lines	e to com		e five					
_	Lobbying Ext	enditures During 4-Year Averaging	Period							
			_		_					

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No						
	4-Year Ave (Some organizations that made a s columns below. See th		ection do not	have to com		ne five
	Lobbying Expe	nditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c)2014	(d) 2015	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
				Sche	dule C (Form 990	or 990-EZ) 2015

Sch	edule C (Form 990 or 990-EZ) 2015				Pá	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	IOT				
					(b)	
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity			No	l ,	A moun	ıt
		Yes		<u>'</u>		
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01 (c)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		-	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2 a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
P	art IV Supplemental Information		l			
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	n lic+\	Dart T	T_ ^ I	inec 1	
	see instructions), and Part II-B, line 1. Also, complete this part for any additional information	γ IISt),	, rait I.	1 -M, I	11169 1	anu

Explanation

Return Reference

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493320036426 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number AMERICAN FUTURE FUND 26-0620554 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non-(f) Method of (q) Description of (h) Purpose of grant valuation non-cash assistance organization if applicable grant cash or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Explanation

Return Reference

PART 1, LINE 2 - PROCEDURES THE ORGANIZATION MAINTAINS DOCUMENTATION IN ITS CORPORATE AND ACCOUNTING RECORDS REGARDING THE AMOUNTS OF FOR MONITORING THE USE OF GRANTS MADE TO ORGANIZATIONS, THE STATUS OF THOSE ORGANIZATIONS, AND THE APPROVAL OF GRANTS BY THE BOARD OF GRANT FUNDS DIRECTORS AMERICAN FUTURE FUND CAREFULLY EVALUATES THE MISSIONS AND ACTIVITIES OF RECIPIENT ORGANIZATIONS PRIOR TO MAKING ANY GRANTS TO ENSURE THAT FUNDS ARE USED APPRPRIATELY AND IN A MANNER THAT IS CONSISTENT WITH THE ORGANIZATION'S TAX EXEMPT PURPOSES

Additional Data

organization

Software ID: Software Version:

if applicable

EIN: 26-0620554

Name: AMERICAN FUTURE FUND

grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of

or government				assistance	other)	
INSTITUTE FOR FAIR ELECTIONS 462 E ARROW HWY UPLAND,CA 91786	95-4681061	501(C)(3)	6,000			GENERAL SUPPORT
THE LEADERSHIP INSTITUTE 1101 N HIGHLAND ARLINGTON,VA 22201	51-0235174	501(C)(3)	3,750			GENERAL SUPPORT
THE PROGRESS PROJECT 6750 WESTOWN PKWY 200- 158 WEST DES MOINES,IA 50266	26-2404352	501(C)(4)	15,700			GENERAL SUPPORT

cash

(book, FMV, appraisal,

non-cash assistance

(h) Purpose of grant

or assistance

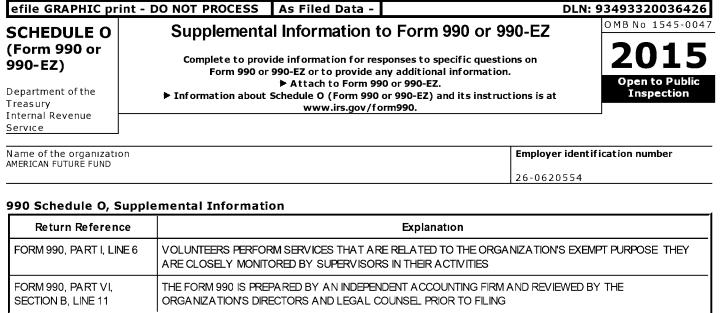
(e) A mount of non- (f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) 45-3070364 501(C)(3) 15,000 GENERAL SUPPORT THE PATRIOTS FOUNDATION GENERAL SUPPORT 6601 WESTOWN PKWY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SUITE 240

50266

WEST DES MOINES, IA



990 Schedule O, Supplemental Information

Return Reference Explanation

FORM 990, PART VI,	THE WRITTEN CONFLICT OF INTEREST POLICY IS REVIEWED AND ENFORCED BY THE DIRECTORS AT THE
SECTION B. LINE 12C	ANNUAL BOARD MEETING AND AS NEW TRANSACTIONS ARISE THAT MAY PRESENT A CONFLICT OF INTEREST

SECTION B, LINE 12C ANNUAL BOARD MEETING AND AS NEW TRANSACTIONS ARISE THAT MAY PRESENT A CONFLICT OF INTERES

FORM 990. PART VI.

THE ORGANIZATION DOES NOT COMPENSATE OFFICERS AND IT DOES NOT HAVE EMPLOYEES

SECTION B. LINE 15

Return Reference Explanation

FORM 990. PART VI. SECTION THE ORGANIZATION PROVIDES COPIES OF ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST

990 Schedule O. Supplemental Information

C, LINE 19	POLICY UPON WRITTEN REQUEST TO THE ORGANIZATION
FORM 990, PART IX, LINE 11G	CONSULTING, MANAGEMENT, COMMUNICATIONS PROGRAM SERVICE EXPENSES 349,215 MANAGEMENT
	AND G

ENERAL EXPENSES 21.785 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 371.000